

Phoenix Cottages Ltd

Phoenix Lodge

Inspection report

62-68a Low Leighton Road
New Mills
High Peak
Derbyshire
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Tel: 01663749257

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

This inspection was unannounced and took place on the 12 April 2016.

Phoenix Lodge is a registered care home and consists of three houses, The Lodge, The Cottage and The House, it is situated in New Mills. The service offers personal and social care to a maximum of 16 adults with a learning disability. Some people have associated conditions that may include, autism, sensory and communication difficulties. At the time of the inspection there were 15 people using the service.

Phoenix Lodge is required to have a registered manager. There was a manager who was in the process of registering with the Care Quality Commission. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The home was person focused and accounted for people's personal likes, dislikes, needs and preferences. We found staff encouraged people to make their own day to day decisions and staff respected those decisions whilst ensuring, and being aware of people's safety.

People were encouraged to take part in activities of their choice. The staff supported and motivated each person to participate in activities; staff were aware of promoting people's independence.

People's right to privacy and dignity was promoted and respected by the staff.

People were cared for and supported by staff who had demonstrated their suitability for the role. The provider had pre-employment checks and recruitment procedures in place to ensure staff were safe to work within the care sector.

Staff were aware of how to protect people from potential harm; local safeguarding procedures were understood by staff. Any alleged abuse or concern was recorded and reported to the local authority in a timely manner.

New staff completed a period of shadowing and induction training prior to them supporting people with their care needs. The provider arranged training for staff, to ensure they were providing appropriate and effective support for people.

The principles and requirements of the Mental Capacity Act (2005) and Deprivation of Liberty Safeguards had been met. Best interest decisions and capacity assessments had been completed when required and were in people's care plans.

Staff felt supported by the manager and the management team. Staff felt there was good team work being carried out.

Medicines were stored, administered and disposed of safely and in accordance with current guidance.

People's bedrooms were decorated in a manner that reflected the needs and personalities of each person.

Effective auditing systems were in place to assess and monitor the quality of the service. Meetings took place with the staff and the people living at the service to collect their opinions and views.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

There were safe and effective recruitment processes in place to ensure staff were fit and suitable to work with vulnerable people.

Sufficient numbers of staff were available to safely meet people's needs. Safeguarding policies and procedures were in place and followed.

People were supported to take their medicines by staff who had received appropriate and effective training.

Is the service effective?

Good ●

The service was effective.

Staff were provided with training to meet people's needs effectively.

People received care by staff who understood their needs well. People had access to health and social care professionals when necessary.

Staff ensured people's consent was sought before any care and support was provided. Principles of the Mental Capacity Act (2005) and Deprivation of Liberty Safeguards (DoLS) were followed.

Is the service caring?

Good ●

The service was caring.

Staff were aware of promoting people's dignity and respected people's right to a family and private life.

People were cared for in a kind and compassionate way and by staff who knew them and their needs well.

Is the service responsive?

Good ●

The service was responsive.

People received personalised care, which met their needs and took into account personal preferences.

People and their relatives were able to raise concerns and were confident they would be dealt with in a prompt manner.

Care plans were completed to enable staff to provide people with personalised care which reflected choice, preference and need.

Is the service well-led?

The service was well-led.

Effective systems were in place to audit and monitor the quality of the service as well as manage risk and make any necessary improvements.

Staff understood their roles and responsibilities and felt supported by the management team.

Good ●

Phoenix Lodge

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 12 April 2016 and was unannounced. The inspection was completed by an inspector and an expert by experience.

Before the inspection, we reviewed the information we held about the service. We contacted the local authority contracts and commissioning team and also reviewed notifications and safeguarding alerts. A notification is information about important events which the service is required to send us by law. We asked the service to complete a provider information return (PIR). This is a form that asks the provider to give us information about the service, what they do well, and what improvements they are planning to make. This was completed and returned to us by the service.

We spoke with ten people who used the service. We also spoke with a relative, two social care professionals and a health care professional to obtain their views about the service. We spoke with twelve staff; this included the deputy manager and the registered manager.

We reviewed a range of records about the people at the service along with documents in relation to how the service was managed. This included three people's care plans, staff records, training records and records in relation to the safe management of the home, such as audits and environmental checks.

Is the service safe?

Our findings

People who were able to, said they felt happy and safe. One person told us, "This is my home and I'm happy being here." A relative told us their family member was happy and safe; the relative explained, since moving to the service their family member had settled and showed improvements in behaviour.

The staff we spoke with felt the service and the people were safe. We asked staff how they would respond if they believed a person at the service was being bullied or abused or if the person disclosed abuse to them. Staff understood their responsibilities and role in such cases. Staff told us they would have no hesitation in reporting any concerns to the provider, the local authority or the Care Quality Commission (CQC). Staff fully understood their role in protecting people from potential harm or abuse. A social care professional told us the registered manager reported any concerns and awaited professional advice to ensure people were protected. We saw safeguarding referrals were made to the local authority and CQC in a timely manner.

People we spoke with told us there were enough staff to meet their needs. One relative told us the staff numbers were sufficient. We saw there were staff on duty to safely meet people's needs. The registered manager explained the level of staffing was determined by people's needs and adjusted when people required additional support. The registered manager explained the staffing levels for each day. We could see there was a rolling rota and staffing levels had been maintained.

We looked at staff recruitment files and saw the required checks had taken place prior to staff working at the home. We found that staff files contained evidence of all of the required pre-employment checks being carried out. This included written references, evidence of the applicant's identity and Disclosure and Barring Service (DBS) checks. These checks helped the provider to ensure staff were of good character and suitable to carry out work with vulnerable people.

We found people received medicines as prescribed and at the time when they were required. One person told us they knew what medicines they were taking and why they took them, and they were happy for the staff to manage them. At this inspection we saw medicines were provided in a pre-prepared 'pod' type system and administered by staff who had received training. We found people's medicines were ordered, stored and recorded correctly.

Staff responsible for the administration of medicines had completed training in the safe handling and administration of medicines. Staff told us they did not give anyone any medicines until they had completed the training. This meant medicines staff received sufficient training to enable them to administer people's medicines in a safe manner.

People's plans of care were supported by risk assessments. We saw care plans included information for emergencies and ill health. Personal emergency evacuation plans (PEEP's) were in place for each person in the case of an emergency, for example, a fire. Staff were able to tell us how they supported people individually to ensure their safety was maintained, risks were lessened and people's independence was still promoted.

Is the service effective?

Our findings

At the time of our inspection, people told us they were happy with the support and care provided by staff. People felt their needs were being met. One person told us, "Staff are good; they help me." A relative told us their family member was, "Well looked after." The relative shared with us how they were encouraged and supported to visit. They told us how their relative had chosen to move to Phoenix Lodge and how they seemed, "Settled and less stressed."

The complex nature of some people's healthcare and care needs were recognised and understood by the registered manager and the staff. People had access to specialist healthcare professionals and referrals were made for advice and guidance in a timely manner.

Staff recognised the need for training and told us they attended a variety of training courses and listed a number of courses they had attended. Staff understood the need to attend training and put new knowledge gained into practice. Staff told us they had attended additional training to meet people's needs when in times of crisis. One staff member explained having the extra training had provided them with additional knowledge and confidence to support people's complex needs. We saw from training records, the staff were supported and encouraged to attend training deemed necessary by the provider and the local authority.

New staff completed a period of shadowing and induction when they commenced their employment. A staff member told us they had missed a part of their induction training due to bereavement. The staff member assured us and they confirmed their induction was complete and we saw they had booked on the next available training sessions they had missed. During the induction period new staff had the opportunity to complete training the provider felt was important. New staff told us the induction period gave them the opportunity to learn about the people's need prior to working with them. This demonstrated to us the provider recognised the importance of ensuring staff were trained and received an induction to be able to work with the people.

There were procedures and guidance available in relation to the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS). The MCA provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to make particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We asked the manager and staff to tell us what they understood about the MCA and DoLS. One staff member told us, "DoLS are in place to protect the service user." When asked about the MCA, another staff member

told us, "We must never assume someone is not capable of making choices about a specific thing." The staff member told us, "We [staff] must always assume people understand and have the capacity to make decisions, unless an assessment has been completed and says otherwise." Staff told us they received training in MCA and DoLS and training records confirmed this.

We saw people were included in decision-making. For example, people were offered choice about the clothes they wore, what they ate at mealtimes and what activities they wanted to participate in. We saw and heard staff checked with people to ensure they understood what was happening and if there was anything in particular people wanted to do. We saw examples of trips out included a visit to Manchester Science and Industry Museum, a trip to Cadbury's World, swimming and 10 pin bowling.

We checked whether the service was working within the principles of the MCA and whether any authorisations to deprive a person of their liberty had been made. We saw the registered manager had made appropriate applications for people to the local authority for assessment and authorisation. There was information in people's care plans regarding mental capacity assessments and best interest decisions. A staff member told us, "We carry out best interest meetings with service user's; we also involve relatives too." This indicated people's consent to care and treatment was being sought consistently as outlined in the Mental Capacity Act 2005.

We saw people were accompanied to attend health appointments as well as being supported to be included in discussions with other professionals. A relative told us there had been improvement in their family members health while they had lived at Phoenix Lodge. The relative told us, "[Person's name] is not as stressed which has helped with reducing epilepsy." A health professional told us staff made timely referrals for advice and guidance when people's needs changed. We saw referrals were made when necessary for people to health professionals for specialist support and guidance. For example, psychologist and speech and language therapist.

People we spoke with all said the food was, "Excellent." One person told us, "I get my breakfast, dinner and tea here; it's good." People told us they were able to choose what they wanted to eat. Healthy eating and a balanced diet were promoted and encouraged. We saw posters were on display to show people what sort of foods were healthy. The staff were knowledgeable about people's nutritional needs and planned the menu with each person to ensure people were provided with a healthy and balanced diet.

In The Cottage, we saw there was a menu board on display to inform people of each day's meals. The menu board was in a pictorial and photographic format so people had a visual reminder of each days meals planned. Each houses' menu took into account individual preferences, choices and dietary requirements. The menu's had been arranged with the people in advance; we saw there was a flexible approach to menu choice and people were still offered alternatives if they had changed their mind and no longer wanted what was on the menu board. Mealtimes in each house were flexible, to meet with people's needs, personal preferences and their activity timetable. This showed an inclusive and flexible approach to menu planning.

At lunchtime, a number of people were out participating in activities of their choice. Some people had gone out for lunch, whereas others were at college or were shopping. Those people had made arrangements as to what and where they would eat. The people who chose to remain at the service were given lots of options and choice as to what they wanted for lunch. We saw staff support people to choose what they wanted for their lunch. Where people were able, staff encouraged and supported them to join in with the meal preparation.

Is the service caring?

Our findings

One person told us, "I'm happy here; I don't want to move on." They went on to tell us, "This is my home." Another person told us, "Staff are nice; they are my friends." A relative told us, "[Person's name] has really settled here." The relative gave an example of how they had noticed an improvement in their family member's health and ability since living at the service. A social care professional told us they too had noticed an improvement in the health of a person since they had been supported by the staff.

People told us and we saw staff responded to requests for help or assistance at the time it was needed. People told us staff were there to help them. Staff told us they supported people and worked with people to promote their independence.

We saw staff worked together with people to complete everyday tasks. For example, we saw staff encourage one person to be included in their lunch preparation. The staff member engaged the person with reassurance and comments such as, "Well done [person's name]; right, what's next?" "Would you mind putting out the place mats, while I get the cutlery?"

We observed how staff interacted with people. We saw helpful relationships had developed between the people living together at the service as well between the people and the staff. This included laughter and conversation. The staff took time to ensure people understood what was happening in a friendly and reassuring manner. We saw and heard staff supported individuals in a kind, caring and compassionate manner.

It was evident that supportive and mutually respectful relationships had developed between people and staff. During our inspection visit we saw and heard lots of helpful and compassionate interaction between staff and people. Staff took time to ensure people's individual choices and preferences were understood.

The staff took time not to rush people and ensured they understood what was happening in a reassuring and friendly manner. Staff were seen and heard to offer people choices. For example, what people wanted to eat and what activities they wanted to do during the day. During our inspection visit one person became quite anxious and upset. The person had changed their mind and no longer wanted to go out as they had previously decided. One of the staff quickly gained the confidence of the person and offered the person time and space to calm and collect their thoughts. Once calm, the staff member discussed options with the person and together they agreed a plan for the rest of the morning. This showed, the staff being aware of including people along with promoting and respecting their choices.

Staff were aware of the need to offer, respect and promote people's dignity and privacy. Staff were able to tell us how they respected people's rights to privacy. An example given was people having keys to their bedrooms. A staff member explained to us how important it was for some people to have their own private space and how staff respected this. The staff member also told us how they respected people's right to privacy when carrying out personal care. They went on to explain, due to the complexities of some people's

diagnosis, routine was important and this was recognised and respected by staff.

People's bedrooms were very much respected as their own personal space. Each bedroom was decorated and personalised to reflect people's own individual choice and taste and staff were seen to knock and announce their presence and waited to be invited into people's bedrooms.

Is the service responsive?

Our findings

The atmosphere at Phoenix Lodge was relaxed, homely and centred around the needs and preferences of individuals. We saw staff and people who used the service worked together and in partnership. We saw bedrooms were personalised, spacious, light and clean; people had lots of personal belongings in their bedrooms which reflected their needs, choice and personalities.

People told us, and we saw, they were involved in all aspects of their day-to-day life along with their own care and support. People were encouraged to share any worries or concerns with the staff. People told us they understood they could complain and raise concerns with the staff or the registered manager, should they have any. We saw one person sought reassurance and shared a personal worry with the registered manager. The registered manager took time to sit with the person and ensure they were reassured by the discussion.

People were supported and motivated to make staff aware of anything they would like to do. We saw staff took time to ensure people were listened to. There were opportunities for people to participate in a variety of activities. Activities were driven and led by each individual rather than the staff. We heard a staff member discussing recent outings with one person. Together they shared their memories of the activity and we saw them looking at a display board of photographs of recent activities and trips. One person showed us photographs of a recent visit to a chocolate factory; they told us they had really enjoyed the day and hoped to return. People were encouraged and supported to follow personal interests and activities.

We saw staff take time to ensure people's needs and requests for assistance were met and understood. Staff were patient and took time to ensure they completely understood what people were trying to communicate to them. Staff clearly knew people well. An example we saw was when one person began to get upset and agitated. The staff worked as a team to quickly ensure the safety of all the people in the vicinity whilst they reassured the person. The registered manager arrived and proceeded to distract the person, offer them support and ascertain what was troubling them. This demonstrated to us good and responsive teamwork to maintain people's well-being.

Staff recognised people's care plans held lots of important information to help ensure people's individual needs and preferences were met. Care plans we looked at were informative and were personalised and included people's personal preferences, likes and dislikes. We saw care plans and risk assessments had been reviewed and updated. Where possible, people had contributed to the development of their care plans. Each care plan was personalised and reflective of each person's individual needs and included risk assessments and health needs' assessments. The care plans were person specific and showed the staff understood they had to be focused on individual needs and wishes.

A relative we spoke with told us they knew how to complain and who to complain to. They told us if they had any worries or concerns they would have no reservation and would speak with any of the staff or the management team. We observed a relative who discussed the welfare of their family member with the

registered manager. The registered manager took time to listen to the relative and offered a supportive, problem solving and reassuring approach. We saw the provider had a complaints policy and procedure in place. Two complaints had been documented in 2015, with details of actions and how the complaints were resolved. This demonstrated to us the provider and registered manager had an effective complaints system in place which was used as learning for the service.

Is the service well-led?

Our findings

People told us the staff listened to them and knew them well. We could see staff were familiar with the needs of people and interacted with them in a manner they understood. A relative told us they knew who to talk to should they have any worries about their family member. Staff told us there was good and supportive team working and any changes to people's needs, would be documented and shared with team members. Staff understood how to raise concerns and pass on information relating to changes in people's needs. For example, reporting of any accidents, incidents and concerns regarding safeguarding.

People at the service were aware who was responsible for the management of the service on a day-to-day basis. People knew they could speak with any of the staff if they ever had any worries or concerns. During our inspection, we saw people seek out staff if something was worrying or troubling them. We saw the staff ensured the person was given reassurance and the time to chat.

People using the service knew the registered manager and told us they could talk to them about any worries or concern they may have. Throughout our inspection visit we saw the registered manager took time to check on people's welfare. The registered manager was visible at the service and knew each person on an individual level. For example, we saw and heard the registered manager chatting to people and checking on their welfare and that of their relatives. Staff told us the registered manager, "Knows all the service users; she knows them well and cares." Another staff member told us, "[The manager] works with us and listen to services users and staff."

Staff told us the registered and deputy managers were both supportive. All the staff we spoke with told us the management team worked well together to ensure the service ran smoothly. One staff member told us, "I feel supported by the managers and the team." Another staff member told us, "The managers are very good; they are approachable and listen." A third staff member told us, "We can always go and speak with the managers if we have any worries or concerns." The registered and deputy managers ensured the service worked in conjunction with other health and social care professionals to ensure people's needs were met.

We saw staff, relatives and people at the service were asked for their views about the service being provided. People also had regular opportunities to be involved in decisions being made about the service and their care. There was an annual questionnaire for people and their relatives. Following feedback from relatives, the registered manager and provider had implemented a designated mobile telephone as a point of contact for relatives. This was introduced as some relatives had expressed concern as they were not always able to contact the service and messages were not always being passed on. The registered manager ensured all relatives had the mobile number and they felt reassured that messages were being followed up.

Phoenix Lodge is required to have a registered manager and there was one in place at the time of our inspection. The registered manager had fulfilled their responsibilities to the Care Quality Commission. There were clear arrangements in place for the day-to-day running and management of the service. The registered manager told us they were supported by a network of staff who worked together to provide people with the

level of care they wanted and needed. The registered manager was aware of their responsibilities and was clear about the circumstances under which they would need to send a written notification to the carer quality commission. For example, notifications of a significant event or concern. In addition, the registered manager had completed the Provider Information return (PIR). This is a form which asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

The registered manager told us the service had been through a, "Difficult period, but we have learned so many lessons." The registered manager went on to tell us they had learned how valuable it is to have a full assessment of people prior to anyone being in receipt of care from the service. They told us how supportive the staff team had been of each other as well as supportive of the needs of the people at the service.

The registered manager had support from the deputy manager, team leaders and their staff team. Staff we spoke with recognised the service had recently been through a challenging time. The staff recognised extensive support had been provided by the registered manager. Staff all expressed how invaluable good teamwork and consistency was.

We saw effective quality assurance systems were in place to monitor and review the quality of the service being provided. Records relating to the running and management of the service were maintained and securely stored. The management team carried out regular audits of all aspects of the service including care planning, infection control and medicines to ensure any areas of concern were identified and when required, improvements were made.